

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	5-18-01
FORMALITY REVIEW	md	579	6/25/01
RESPONSE FORMALITY REVIEW	TAP	110	8-3-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	7/10/01
2	9/10/01
3	3/20/01
4	8/15/01
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Claim	Date
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If more than 150 claims or 10 actions  
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705/579

5-25-01